| ANTONIA HERN. BO. EL TUQUE SI SI3 CALLE L PONCE, PR 00724 SS: XXX-XX-683 Descripcion Pago de Salarios Reg | ECT NUEVA B 16 | HORASS | e Nicitios ueldo | # Emplead Dept: Lugar: Titulo: Sueldo: Corriente — Horas | o: XXXXX6836 127100-Ponce Ponce 3 Tecnico Asist S \$2,434.00 Mor | Soc y Fam III Whiy | | DATA IMP: Federal Estado Civil: Single Concesiones: 0 | PR Single 0+6 | - |
|--|--------------------------|--|---|---|---|------------------------------------|--|--|---------------------|--------------------------------------|
| Descripcion . | | - | |)S Corriente — | \$2,434.00 Mor | nthly | | Pct. Adcl.: | | |
| Descripcion . | | - | | Corriente - | | | | Cant. Addl.: | | |
| | gulares | s | ueldo | Ногаз | | — Acumu | lado | IMP | PST6S | |
| | , | | | | Ingresos 1,217.00 | Horas | ōngresos | Descripcion | Corriente | Acumulado |
| | | | | | 1,217.00 | 75.00 | 1,217.00 | Fed FICA Med Hospital In: Fed OASDI/Disability - EE PR Withholding | S / EE 1765 | 17.65 75.45 23.51 |
| | | | | | | | | | | |
| Total: DEDEKT | HONES | | | | 1,217,00 | 75.00 | 1.217.00 | Total: | 116.61 | 116.61 |
| Descripcion | | Corriente A | cumulado | Descripcion | EURENONIA E | Corriente | | HENDER (OX PA) Descripcion | | L.C. |
| GPR Retiro Hibrido | | 121.70 | 121.70 | SM-First Me DM-FONDO SC-TRANS RC-Pres Per DM-GOB SI | p. Obligatorio edical Health Plan OS UNIDOS OCEANIC LIFE TO Ret Cen-E Clasif EG SOC CHOFER UBLICOS 009 B EELA | 3.0 5.2 1.0 16.7 131.5 | 4 3.04 5 5.25 0 1.00 3 16.73 2 131.52 9 1.09 0 18.00 | GPR Retiro Hibrido FSED Disability Plan SM-First Medical Health Pl | 188.94 40.77 | Acumulado 188.94 40.77 0.00 |
| Total: | | . 121.70 | 121.70 | Total. | | 213.14 | 213.14 | Tributable | | |
| Corriente: | 757 | AL BRITTO 1,217.00 | H | UPO WEEL | 0.00 | TOTAL IN | 116.61 | ODDOGRANIA STORAGE | | ACAN NEW Y |
| Acumulado: Vacación | | 1,217,00 Enfermedad | *************************************** | ~~~~~ | 0.00 | | 116.61 | 334.84 334.84 | | 765.55 765.55 |
| Balance Previo: | | Balance Previo | | | mpe Comp. ance Previo: | 0.00 | | DISTRIBUCION Aviso #5618186 | PAGA NETA | |
| + Acumulado: · Utilizado: | | + Acumulado: - Utilizado: | | | Acumulado: | 0.00 | | WARO %3019190 | | 765.55 |
| Balance Final: | | - Ounzado: Balance Final: | | | ilizado: ince Final: | 0.00 | | Total: | | 765.55 |
| s balances de licencia | | den al período o | de: | | | | 9 | | | |
| .dm.Desarrollo S O BOX 8000 AN JUAN, PR 0 | | | | | | Fec 01/ | ha 13/2017 | | | iso No. 18186 |
| ant. Deposito: | <u>\$765.55</u> | | | | | | Tipo de Cu Savings | ENON DE DEPONICO DIRE enta Numero de Cuento XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | a Cant | . Deposito 765.55 |
| a enta(s) De | SO. EL SI3 CAL PONCE, | IA HERNA TUQUE SEC LE L PR 00728 tion: Ponce | CT NUE | IERRERA VA VIDA | A | | Total: | | | 765.55 |

Page 2 of 15 -

dm.Desarrollo Socio Economico OX 8000

N JUAN, PR 00910-0800

5895472 Aviso #: SM -Quincenal 01/16/2017 Grupo de Pago: Fecha Aviso: 01/30/2017 01/31/2017 Hasta:

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA SI3 CALLE L PONCE, PR 00728

Empleado: XXXXX6836 127100-Ponce Dept: Ponce 3 Lugar: Titulo:

DATA IMP Estado Civil: Single Concesiones: Pct. Adcl.:

Single

0+6

SS: XXX-XX-6836

Tecnico Asist Soc y Fam [0] \$2,434.00 Monthly Sueldo:

Cant. Adcl.

| | 110 | RASEINGH | | *************************************** | | 200000000 | | | MPHESTOS | |
|---|-------------------------------|------------------|---|---|-----------------|-----------|------------------|---|-------------------|------------------|
| | | Sueldo | Corriente Horas | Ingresos | Acu | | | Descripcion | | |
| Descripcion | | Sucido | погаѕ | 1,217.00 | Horas 165.00 | | gresos 434.00 | Fed FICA Med Hospit | Corriente | Acumulad |
| Pago de Salarios Regula | ires | | | 1,217,00 | 100,000 | 2, | 43430 | Fed OASDI/Disability | | 35.29 |
| | | | | | | | | PR Withholding | 23.51 | 150.91 47.02 |
| | | | | | | | | TR Willing | 251 | 47.02 |
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| otal: | | | | 1,217.00 | 165.00 · | | 434.00 | Total: | 116.61 | 233.2 |
| 13(3)(1)(1)(1) | | | | DEDUCCION | | | | | SPASSES CASSASSAS | |
| Descripcion | Corriente | | | | Согті | | Acumulado | | | Acumulad |
| SPR Retiro Hibrido | 121.7 | 0 243.4 | | ncap. Obligatorio | ľ | 3.04 | 6.08 | SM-First Medical Hea | | |
| | | | | t Medical Health I | | 5.25 | 10.50 | GPR Retiro Hibrido | 188.94 | |
| | | | | NDOS UNIDOS | 1 | 1.00 | 2.00 | FSED Disability Plan | 40.77 | 81. |
| | | | SC-TRA | NS OCEANIC LI | FE : | 16.73 | 33.46 | ì | | |
| | | | RC-Pres | Pers Ret Cen-E C | Clasif 13 | 11.52 | 263.04 | | | |
| | | | | B SEG SOC CHO | | 1.09 | 2.18 | ł | | |
| | | | OS-SER | V PUBLICOS 009 | B . 1 | 8.00 | 36.00 | | | |
| | | | Ahorros | -AEELA | 3 | 651 | 73.02 | } | | |
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| | <u> </u> | · · · | 1 | · | | 8 | | <u>, , , , , , , , , , , , , , , , , , , </u> | ٦٠ | |
| Total: | 121. | | | | | 3.14 | 426.28 | * Tributable | , | |
| | *********** | LTO | BRUTON | | 10315 | en de la | ESTOR: | DEDUCCIONES TO | | eaga nee |
| | | 7.00 | | 0.00 | | | 116.61 | 334 | | 765.55 |
| Corriente: | | 400 | | 0.00 | | | 233.22 | 669 | | 1 <i>5</i> 31.10 |
| Acumulado: | 2,43 | | ********* | | | | | | | |
| Acumulado: Vacación | Hereis Eafern | edad | *************************************** | Teempo Comp. | Hora | 77333 | | | SIOR PAGE NEXT | |
| Acumulado: Varación Balance Previo: | Floras Enferm 0.00 Balance | redad Previo: | 0.00 | Balance Previo: | 0, | 00 | | Aviso #589 | | 765.5 |
| Acumulado: Varación | Hereis Eafern | redad Previo: | 0.00 0.00 | | 0. 0. | 00 | | | | |

Los balances de licencias corresponden al periodo de:

0.00 Balance Final:

MENSAJE:

Balance Final:

Adm. Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 01/30/2017

0.00

0.00 Balance Final:

Aviso No. 5895472

Cant. Deposito:

\$765.55

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L

PONCE, PR 00728 Localizacion: Ponce 3

| Tipo de Cuenta | Numero de Cuenta | Cant. Deposito |
|----------------|------------------|----------------|
| Savings | XXXXXXXXXXXXXXXX | 765.55 |
| | | |
| | | |
| | | |
| | | |
| Total: | | 765.5 |

127 Adm. Desarrollo Socio Economico

SM -Quincenal 02/01/2017 Grupo de Pago: Desde: 02/15/2017 Hasta:

6324215 Aviso #: Fecha Aviso: 02/14/2017

PO BOX 8000 SAN JUAN, PR 00910-0800

| | ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA SI3 CALLE L PONCE, PR 00728 SS: XXX-XX-6836 | # Empleado: Dept: Lugar: Titulo: Sueldo: | XXXXX6836 127100-Ponce Ponce 3 Tecnico Asist Soc \$2,434.00 Month | y Fam III Iy | DATA IMP: Estado Civil: Concesiones: Pct. Adcl.: Cant. Adcl.: | Federal Single O | PR Single 0+6 | |
|---|--|--|---|-----------------|---|------------------------|---------------------|-----------|
| | 22: XXX-X2-22-2 | | | | | KEPCH | X510\S | |
| I | - Culto | Corriente | Ingresos Ho | Acumulado —— | Descripcion | | Corriente | Acumulado |

| | | (ORAS IS) | NG RESO | 5 | | | | | | 3.03 | |
|---------------------------|------------|------------|-----------|--------------|----------------------|----------|---------------|--------------------|---|----------------|------------------------|
| | | | | Corriente | | Horas | Cumula | ido —— Ingresos | | Corriente | Acumulado |
| Descripcion | | Suel | do | Horas | Ingresos 1,217,00 | 247.50 | + | 3,651.00 | Fed FICA Med Hospital Ins / | EE 17.65 | 52.94 |
| Pago de Salarios Regulare | s | | | | 1,217,00 | 247.3(| | 3,501,00 | Fed OASDI/Disability - EE PR Withholding | 75.45 23.51 | 22636 70 <i>5</i> 3 |
| | | <i>-</i> . | • | , | *:** .* | | • | | مرحد د. د د د | | - |
| | | | | | | • • | | _ | | | |
| Parali | | | | | 1.217.00 | . 247.50 | 0 | 3,651.00 | Total: | 116.61 | 349.83 |
| Total: DEGREESES | | ********** | ********* | XXXXXXX | * DEDUCCIONE | | | | HENERICH SEAT | (CN:NEVE PAG) | DOS |
| Descripcion | Corrie | | ımulado | Descrip | | | rriente | Acumulado | Descripcion | Corriente | Acumulado |
| GPR Retiro Hibrido | | | | | ncap. Obligatorio | | 3.04 | | GPR Retiro Hibrido | 188.94 | 566.82 |
| JPK Kemio mionao | •• | | J [| | t Medical Health I | Plan | 5.25 | | FSED Disability Plan | 40.77 | 122.31 |
| | | | ŀ | | NDOS UNIDOS | | 1.00 | | SM-First Medical Health Pla | 0.00 n | 180.00 |
| | | | • | | NS OCEANIC LI | FE | 16.73 | | Į. | | |
| | | | Į. | | s Pers Ret Cen-E C | | 131.52 | | | | |
| | | | ì | | B SEG SOC CHO | | 1.09 | | | | |
| | | | | | V PUBLICOS 009 | | 18.00 | | | | |
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| Total: | | 21.70 | 365.10 | | | | 213.14 | | * Tributable | | |
| | TOTAL | | BR | UIO U | ibut fed | TO | PAL IA | PUESTOS | DEDUCCIONES TOTALES | | (848) EE |
| Corriente: | | ,217.00 | | | 0.00 | | | 116.61 | 334.84 | | 765.55 |
| Acumulado: | | .651.00 | | ************ | 0.00 | | ····· | 349.83 | 1,004.52 | | 2.296.65 |
| | orac Enfe | | | larae . | Themps Comp. | H | 0725 | | DISTRIBUCION | PAGA NETA | |
| Balance Previo: | | ce Previo: | | 0.00 | Balance Previo: | | 0.00 | | Aviso #6324215 | | 765.55 |
| + Acumulado: | | zumulado: | | 0.00 | + Acumulado: | | 0.00 | | | | |
| Utilizado: | | izado: | | 0.00 | - Utilizado: | | 0.00 | | Total: | | 765.55 |
| Palance Final: | 0.00 Balan | ce Final: | | 0.00 | Balance Final: | | 0.00 | | | | |

Los balances de licencias corresponden al periodo de:

MENSAJE:

Adm.Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 02/14/2017

Aviso No. 6324215

Cant. Deposito:

<u>\$765.55</u>

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L

PONCE, PR 00728 Localizacion: Ponce 3

| Tipo de Cuenta | Numero de Cuenta | Cant. Deposito |
|----------------|------------------|----------------|
| Savings | XXXXXXXXXXXXXXXX | 765.5 |
| | | |
| | | |
| | | |
| Total: | | |
| | | 765.5 |

127 Adm. Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Aviso #: SM -Quincenal 02/16/2017 Grupo de Pago: Fecha Aviso: 02/28/2017 Hasta:

Federal ANTONIA HERNANDEZ HERRERA DATA IMP: # Empleado: XXXXXX6836 Single 127100-Ponce Single Dept: Estado Civil: BO. EL TUQUE SECT NUEVA VIDA Concesiones: 0+6SI3 CALLE L Lugar: Ponce 3 Titulo: Tecnico Asist Soc y Pam III \$2,434.00 Monthly Pct. Adcl.: PONCE, PR 00728 Sueldo: Cant. Adcl. SS: XXX-XX-6836

| SS: XXX-XX-6836 | | | | | Within | | | | | • |
|---------------------------|------------------------------|-----------|-------------------|-------------------------------------|-------------|--------------|-----------|-------------------------------|---------------|----------|
| | HORAS | SENSEDES | C | | *********** | | | IMPERS | ros | |
| | distribution of the contract | | Corriente · | | A | cumulado | | | | |
| Descripcion | | Sueldo | Horas | Ingresos | Horas | | ngresos | Descripcion Co | оггіспіс | Acumula |
| ago de Salarios Regulares | | | | 1,217,00 | 315.00 | | 4,868.00 | Fed FICA Med Hospital Ins / E | E 17.65 | 70.5 |
| ago de Salatios Accoratos | | | | | | | | Fed OASDI/Disability - EE | 75.46 | 301.8 |
| | | | | | | | | PR Withholding | 23 <i>5</i> 1 | 94.0 |
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| | | | | 1,217,00 | 015.00 | | 4.868.00 | Total: | 116.62 | 466 |
| otal: DEDUCCION | ***************** | | 50000000000000000 | DEDUCCION | : 315.00 | | UL 808, P | TOTAL: | | |
| | Corriente | Acumulado | Descripc | | | rriente | Acumulado | Descripcion | Corriente | Acumulac |
| escripcion | 121.70 | 486.80 | | | | | 12.16 | SM-First Medical Health Plan | 180.00 | 360.1 |
| GPR Retiro Hibrido | 121.70 | 480.80 | | ncap. Obligatorio Medical Health | | 3.04 5.25 | 21.00 | GPR Retiro Hibrido | 188.94 | 755.7 |
| | | | | NOOS UNIDOS | Pian | 1.00 | 4.00 | FSED Disability Plan | 40.77 | 163.0 |
| | | | | | | | | PSED Disability Flair | 40.77 | 1007 |
| | | | | NS OCEANIC L | — | 16.73 | 66.92 | | | |
| | | | | Pers Ret Cen-E | | 131.52 | 526.08 | | | |
| | | | | B SEG SOC CH | | 1.09 | 4.36 | | | |
| | | | | V PUBLICOS 00 | 19 B | 18.00 | 72.00 | | | |
| | | | Ahorros | -AEELA | | 36.51 | 146.04 | | | |
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| 1 | | | | į | , . | | | | | |
| Total: | 121.70 | 486.80 | Total: | | · | 213.14 | 852.56 | * Tributable | | |
| | TOTAL BRITT | O B | RUTO II | BUT FOR | 10 | | | DEDUCCIONES TOTALES | P. | CAN NEWS |
| Соптепи: | 1,217.0 | 0 | | 0.00 | | | 116.62 | 334.84 | | 765.54 |
| Acumulado: | 4,868.0 | | | 0.00 | | | 466.45 | 1,339.36 | | 3.062.19 |
| | Horassi Renterativ | | | Temps Comp. | E) | | | DISTRIBUCIONEA | GA NETA | |
| Balance Previo: | 0.00 Balance P | evio: | 0.00 | Balance Previo: | | 0.00 | | Aviso #6593064 | | 765.54 |
| + Acumulado: | 0.00 + Acumu | ado: | 0.00 | + Acumulado: | | 0.00 | | | | |
| - Utilizado: | 0.00 - Utilizado | : | 0.00 | - Utilizado: | | 0.00 | | Total: | | 765.54 |
| Balance Final: | 0.00 Balance Fi | nal: | 0.00 | Balance Final: | | 0.00 | | · | | |

Los balances de licencias corresponden al periodo de:

MENSAJE:

Adm.Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 02/28/2017 Aviso No. 6593064

02/28/2017

Cant. Deposito:

<u>\$765.54</u>

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L PONCE, PR 00728

Localizacion: Ponce 3

| XXXXXXXXXXXXXXX | 765.54 |
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| Case:17-03 | 3283-L | TS D | oc#:13 | 964-1 | L Filed:0 | 8/04/2 | 20 E | ntered: | 08/05/20 | 11:38: | 46 D | esc | |
|-------------------------------------|----------------|--------------------|-----------|------------------|---------------------------------|---------------------------------------|----------------|--------------------------|----------------------------|------------------------------|----------------|---------------|---------------------|
| 127 A Jun Desarr | ollo Soci | Econor | | | | | o de Pago | : SM -Quin | cenal | | Aviso #: | | 823985 |
| PO BOX 8000 : SAN JUAN, PR. 0091 | | | | | | Des Has | de: | 03/01/201 03/15/201 | | | Fecha Av | iso: 0 | 3/15/2017 |
| | | | | | | | 18: | 03/13/20 | | | | | |
| ANTONIA HERNAN BO. EL TUQUE SECT | DEZ HERR | ERA | | # Emple Dept: | 22do: XXXXX68 127100-Po | | | | DATA IMP: Estado Civil: | Federal Single | PR Single | | |
| S13 CALLE L | I NOLVA V | IDA | | Lugar: | Ponce 3 | | | | Concesiones: | 0 | 0+6 | | |
| PONCE, PR 00728 | | | | Titulo: | Tecnico As | ist Soc y F | am III | | Pct. Adcl.: | | | | |
| SS: XXX-XX-6836± | dere | us. gave se | | Sueldo: | \$2,434.00 | Monthly | | | Cant. Adcl.: | | | | |
| | | Hora | STANGRESS | S Corriente | | | Acumulado | | | IK e re | estos | | |
| Descripcion | | | Sueldo | Horas | Ingresos | Horas | Ir | ngresos | Descripcion | | Corriente | | Acumulad |
| Pago de Salarios Regula | eres | | - | | 1,217.00 | 397.5 | 0 6 | 00.280,6 | | d Hospital Ins | | | 88.23 377.27 |
| } | | | | | | | | | PR Withholdi | Disability - EE ng | 75.45 23.51 | | 117.55 |
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| Total | | | | | 1,217,00 | 207.5 | 0 4 | 5,085,00 | Total: | | 116.60 | | 603.04 |
| Total: DROUGEM | DNES | | | | DEDUCCION | 397.5 | | אינטאו | | RICHOSPAT | | | 583.05 808 |
| Descripcion | | orriente | Acumulado | Descrip | cion | C | orriente | Acumulado | Descripcion | | | | Acumulado |
| GPR Retiro Hibrido | | 121.70 | 608.50 | | ncap. Obligatorio | | 3.04 | 15.20 | GPR Retiro I | | | 88.94 | 944.70 |
| | | | | ı. | Medical Health | Plan | 5.25 | 26.25 5.00 | FSED Disabi | lity Plan lical Health Pl | | 40.77 0.00 | 203.85 360.00 |
| | | | | L | NS OCEANIC L | IFE. | 1.00 18.16 | 85.08 | SM-LIIN MC | ilcai ricaiui Fi | | 0.00 | 300.00 |
| September 1 1995 | ومالالتالالة | 77:2 e | · . | | s Pers Ret Cen-E | | 131.52 | 657.60 | 1 | | | | |
| | • | | | | B SEG SOC CHO | | 1.09 | 5.45 | | | | | |
| | | | | | RV PUBLICOS 00 s-AEELA | 9 B | 18.00 36.51 | 90.00 182 <i>.</i> 55 | | | | | |
| | | | | Allono | 3-ALCUA | | 3031 | 102.33 | | | | | |
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| Total: | | 121.70 | | Total: | | | 214.57 | 1,067.13 | * Tributable | | ********** | | |
| Corriente: | 3333333355X | AL BRUT 1,217.0 | | Kenesa | O.OO | ::0 | TAE IMP | 116.60 | DEDUCCION | 336.27 | <u> </u> | ************ | GA NECEA: 764.13 |
| Acumulado: | | 6,085.0 | | | 0.00 | | | 583.05 | | 1,675.63 | | | 3.826.32 |
| Vacacion | | Enfermed | | Horas | Tremps Comp. | Ü | 01:49 | ` | | TRIBUCION | PACANE | | |
| Balance Previo: + Acumulado: | 0.00 | + Acumu | | 0.00 | Balance Previo: + Acumulado: | | 0.00 | | Avi | so #6823985 | | | 764.13 |
| - Utilizado: | 0.00 | - Utilizado | | 0.00 | - Utilizado: | | 0.00 | | Tot | al: | | | 764.13 |
| Balance Final: | 0.00 | Balance Fi | nal: | 0.00 | Balance Final: | <u> </u> | 0.00 | | • • | | | | |
| Los halances de licencia | e carreenan | den al neri | odo de: | | | | | | | | | | |
| Los Dalances de licencia | a correspon | uen ar per | 000 00. | | | | | | | | | | |
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| MENSAJE: | | | | | | - | | | | | | | |
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| Adm.Desarrollo S | Sacia For | nomico | | | | | Fech | _ | | | | A vot | so No. |
| PO BOX 8000 | | | | | | | | a 5/2017 | | | | | 3985 |
| SAN JUAN, PR | 00910-08 | 00 | . ' | | ; | | : | | | | | | |
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| | | | | | | | | 21112 | TENDA DE UE | BEACKERSTAN | CAMPA | | |
| _ | | | | | • | | | Tipo de C | | nero de Cuent | | Cant. | Deposito |
| Cant. Deposito: | <u>\$764.1</u> | 3 | | | | , | | Savings | | XXXXXXXX | | | 764.13 |
| A la | | | | | | | | | | | | | |
| Cuenta(s) De | | | | | | | | | | | | | |
| , , | | | RNANDEZ | | | | | | | | | | • |
| | BO. EI | TUQU | E SECT NU | JEVA V | /IDA | | | . | | | | | |
| | BUNC: | ALLEL E, PR 00 | 728 | | | | | | | | | | |
| | Localiz | acion: P | once 3 | | | | | Total: | | | | | 764.13 |
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Case:17-03283-LTS Doc#:13964-1 Filed:08/04/20 Entered:08/05/20 11:38:46

Exhibit Page 6 of 15

arrollo Socio Economico 8000

NJUAN, PR 00910-0800

SM -Quincenal 03/16/2017 03/31/2017 7074771 Grupo de Pago: Aviso #: Fecha Aviso: 03/30/2017 Hasta:

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA SI3 CALLE L PONCE, PR 00728 SS: XXX-XX-6836

Empleado: XXXXX6836 Dept: 127100-Ponce Lugar: Ропсе 3 Titulo:

Sueldo

Tecnico Asist Soc y Fam III \$2,434.00 Monthly

DATA IMP: Federal Estado Civil: Single Single Concesiones: 0 0 + 6Pct. Adcl.:

| | | FORASI | | | | | *** | | | AT | PURST | 28 | |
|--------------------------|----------|-----------------|----------|----------|---|--------------------------|-------|--------------|------------|-------------------------|------------|---|--------------|
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| Descripcion | | S | ucido | Hora | | Horas | | Ingresos | Descrip | | | riente | Acumula |
| Pago de Salarios Regular | res | | | | 1,217.00 | 487.50 | | 7,302.00 | | CA Med Hospital | | | 105.88 |
| | | | | | | | | | | ASDI/Disability - | EE | 75.A5 | 452.72 |
| | | | | | | | | | PK WI | thholding | | 23.51 | 141.0 |
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| Total: | | | | | 1,217,00 | 487.50 | | 7,302.00 | Total: | | | 116.61 | 699.6 |
| DEDEGREE | NDS | | | | DEDUCCION | | 1055 | | | BENERICHUS | AVERCOR | | |
| Descripcion | | | cumulado | Descrip | cion . | Corr | iente | Acumulado | Descrip | cion | | Corriente | Acumulado |
| GPR Retiro Hibrido | • | 121.70 | 730.20 | | Incap. Obligatorio | | 3.04 | 18.24 | SM-Firs | st Medical Health | Plan | 180.00 | 540.00 |
| | | | | | st Medical Health | Plan | 5.25 | | - | tiro Hibrido | | 188.94 | 1,133.64 |
| | | | | | NDOS UNIDOS | | 1.00 | 6.00 | FSED D | Disability Plan | | 40.77 | 244.62 |
| | • | | | | ANS OCEANIC I | | 18.16 | | | | | | |
| | | | | | s Pers Ret Cen-E | | 31.52 | | | | | | |
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| Total: | | 121.70 BRUPO | | Total: | *************************************** | Terretain and the second | 14.57 | | * Tributat | | | | |
| Corriente: | | 1.217.00 | | | 0.00 | | 28141 | 116.61 | 0000000 | TONES TO TAL | .5 | P. | EASTERN . |
| Acumulado: | | 7,302,00 | | | 0.00 | . | | 699.66 | | 336.27 | | | 764.12 |
| Vermidda | Here L | | | | Tempo Courp. | Host | 888 | 0,77,00 | | 2.011.90 DISTRIBUCIO | 32.340.352 | *************************************** | 4,590.44 |
| Balance Previo: | | lance Previo | | 0.00 | Balance Previo: | . 0.1 | | | F | Aviso #7074771 | | W. 5. K. III | ************ |
| + Acumulado: | 0.00 + | Acumulado: | ; | 0.00 | + Acumulado: | , o | | | l | A 190 # 1014111 | | | 764.12 |
| - Utilizado: | | Itilizado: | | 0.00 | - Utilizado: | 0.0 | | | | Total: | | | 764.12 |
| Balance Final: | 0.00 Bal | ance Final: | | 0.00 | Balance Final: | 1.0.1 | | | Ł | | | | /04.12 |

Los balances de licencias corresponden al período de:

MENSAJE:

Adm.Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 03/30/2017

Aviso No. 7074771

Cant. Deposito:

\$764.12

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L PONCE, PR 00728

Localizacion: Ponce 3

| Tipo de Cuenta | Numero de Cuenta | Cant. Deposito |
|----------------|------------------|----------------|
| Savings | XXXXXXXXXXXXXX | 764.12 |
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| | | |
| | | |
| • | | |
| Total: | | |
| | | 764.12 |

Exhibit Page 7 of 15

127 Adm. Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800
 Grupo de Pago:
 SM -Quincenal
 Aviso #:
 7363420

 Desde:
 04/01/2017
 Fecha Aviso:
 04/13/2017

 Hasta:
 04/15/2017
 O4/15/2017
 04/13/2017

| | | <u> </u> | | | |
|------------------------------|-------------|-----------------------------|---------------|---------|--------|
| ANTONIA HERNANDEZ HERRERA | # Empleado: | XXXXXX6836 | DATA IMP: | Federal | PR |
| BO. EL TUQUE SECT NUEVA VIDA | Dept: | 127100-Ponce | Estado Civil: | Single | Single |
| S13 CALLE L | Lugar: | Ponce 3 | Concesiones: | 0 | 0+6 |
| PONCE, PR 00728 | Titulo: | Tecnico Asist Soc y Fam III | Pct. Adcl.: | | |
| SS: XXX-XX-6836 | Sueido: | \$2,434.00 Monthly | Cant. Adcl.: | | |

| | FIGURA | SKINGRES | 535 | | | | | MPUESTOS | |
|----------------------------|-------------------|-----------|-----------|---|----------|-----------|------------------------|------------------|--|
| | | | Corriente | | Acum | ulado | | | |
| Descripcion | | Sueldo | Horas | Ingresos | Horas | ångresos | Descripcion | Corriente | Acumulad |
| Pago de Salarios Regulares | | | | 1,217.00 | 562.50 | 8,519.00 | Fed FICA Med Hospitz | I Ins / EE 17.65 | 123.53 |
| | | | | | | | Fed OASDI/Disability | - EE 75.46 | 528.11 |
| | | | | | | | PR Withholding | 23.51 | 164.5 |
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| Total: | | | | 1,217,00 | 562.50 | 8.519.00 | Total: | 116.62 | 816.2 |
| 05066600 | 6 | | ***** | DEDUCCIONE | | | | PATRONAL PRIPAG | (5102 |
| Descripcion | Corriente | Acumulado | Descripci | Off | Согтіеп | | | | Acumulad |
| GPR Retiro Hibrido | 121.70 | 851.90 | SI-Seg In | cap. Obligatorio | | 04 21.28 | GPR Retiro Hibrido | 188.94 | 1,322.5 |
| | | | | Medical Health P | | 25 36.75 | FSED Disability Plan | 40.77 | 285.3 |
| | | | | DOS UNIDOS | | 25 30.73 | SM-First Medical Healt | | |
| | | | | NS OCEANIC LI | | | SM-FIISI MEDICAI REAL | n Fian U,UU | 540.0 |
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| | | | Automos- | ACELA | 36. | 51 255.57 | | | |
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| Total: | 121.70 | 851.90 | Total: | | 214. | | | | |
| | TOTAL BRUTT | | | BIDDE STORE | | | * Tributable | | |
| Corriente: | 1,217.00 | | | 0.00 | | | 00500606010005590016A | | A STATE OF THE STA |
| Acumulado: | 8.519.00 | | | 0.00 | | 116.62 | 336.27 | | 764.11 |
| Varicon Po | res Enfermeda | | 100 | Sempe Comp. | | 816.28 | 2,348,17 | | <u>5.354.55</u> |
| Balance Previo: | 0.00 Balance Pre | | | Balance Previo: | 80.00 | l | DISTRIBUCI | ON PAGA NETA | |
| + Acumulado: | 0.00 + Acumula | | | - Acumulado: | 0.00 | 1 | Aviso #73634 | 20 | 764.11 |
| | 0.00 - Utilizado: | | | Utilizado: | 0.00 | | | | ••• |
| | 0.00 Balance Fin | | | alance Final: | 0.00 | 1 | Total; | | 764.11 |

Los balances de licencias corresponden al periodo de:

MENSAJE:

Adm.Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 04/13/2017

Aviso No. 7363420

Cant. Deposito:

\$764.11

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L

PONCE, PR 00728 Localizacion: Ponce 3

| Tipo de Cuenta | Numero de Cuenta | Cant. Deposito |
|----------------|-------------------|----------------|
| Savings | XXXXXXXXXXXXXXXXX | 764.11 |
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| Total: | | |
| | | 764.1 |

| L27 Adm. Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800 ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA SI3 CALLE L PONCE, PR 00728 SS: XXX-XX-6836 Descripcion HORAS SENISRISSISSISSISSISSISSISSISSISSISSISSISSI | Aviso #: 7611142 Fecha Aviso: 04/28/2017 PR Single 0+6 PSTOS Corriente Acumulado / EE 17.64 141.17 |
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| 127 Adm. Desarrollo Socio Economico | PR Single 0+6 Corriente Acumulado / EE 17.64 141.17 75.45 603.53 |
| PO BOX 8000 SAN JUAN, PR 00910-0800 ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA BIJ CALLE L PONCE, PR 00728 SS: XXXXX6836 Dept: 127100-Ponce Lugar: Ponce J Lugar: Ponce J Sueldo: \$2,434.00 Monthly HONAS INGROSS HONAS INGROSS Sueldo Horas Ingresos Horas Ingresos Fed PICA Med Hospital fins Fed PICA Med Hospital fins Fed OASDI/Disability - EE | Single 0+6 |
| ANTONIA HERNANDEZ HERRERA # Empleado: XXXXX6836 DATA IMP: February | Single 0+6 |
| ANTONIA HERNANDEZ HERRERA # Empleado: X.AXA6836 Estado Civil: Single | 0+6 PSTDS: Corriente Acumulado / EE 17.64 141.17 75.45 603.63 |
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| STAILLE | Corriente Acumulado / EE 17.64 141.17 75.45 603.63 |
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| HURAS EINGRESOS Corriente | / EE 17.64 141.17 75.45 603.63 |
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| scripcion Corriente Acumulado Descripcion 304 24.32 SM-First Medical Health I | Plan 180.00 720.00 188.94 1,511.52 |
| PR Retiro Hibrido 121.70 973.00 GPR Retiro Hibrido | 40.77 326.16 |
| DM-FONDOS UNIDOS 1.00 8.00 FSED Disability Plan | 70.17 |
| SC-TRANS OCEANIC LIFE 18.16 139.56 PC-Pres Pers Per Cen-F Clasif 131.52 1.052.16 | |
| RC-Pres Pers Ret Cen-E Clasif 131.52 1,052.16 DM-GOB SEG SOC CHOPERES 1.09 8.72 | |
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| Total: 121.70 973.60 Total: 214.57 1.710.84 * Tributable | as Paga Neta |
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| Balance Previo: 0.00 Balance P | |
| + Acumulado: 000 + Acumulado. Total: | 764.13 |
| - Utilizado: 0.00 - Utilizado: 0.00 - Utilizado: 0.00 Balance Final: 0.00 Balance Final: 0.00 | |
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| Adm. Desarrollo Socio Economico Fecha | Aviso No. |
| PO BOX 8000 04/28/2017 | 7611142 |
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| PO BOX 8000 SAN JUAN, PR 00910-0800 | 7611142 |
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| PO BOX 8000 SAN JUAN, PR 00910-0800 Distribution Distribution | 7611142 DRECTO |
| PO BOX 8000 SAN JUAN, PR 00910-0800 Cant. Deposito: \$764.13 Luenta(s) De | 7611142 DRECTO |
| PO BOX 8000 SAN JUAN, PR 00910-0800 Distribution Distribution | 7611142 DRECTO |
| PO BOX 8000 SAN JUAN, PR 00910-0800 Cant. Deposito: \$764.13 Ala Cuenta(s) De ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA-VIDA S13 CALLE L | 7611142 DRECTO |
| PO BOX 3000 SAN JUAN, PR 00910-0800 Cant. Deposito: \$764.13 A la Cuenta(s) De ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA-VIDA S13 CALLE L PONCE, PR 00728 | 7611142 DRECTO |
| PO BOX 8000 SAN JUAN, PR 00910-0800 Cant. Deposito: \$764.13 Ala Cuenta(s) De ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA-VIDA S13 CALLE L | 7611142 DRECTO |

| | Z HERRERA RUEVA VIDA FIGRAS E INGRESO Sueldo | # Empleado: XXXXX6836 Dept: 127100-Ponce 3 Titulo: Tecnico Asist S Sueldo: \$2,434.00 Mon S Corriente Horas Ingresos 1,217.00 | Desde: Hasta: oc y Fam III thiy Acumula Horas 720.00 | gol SM Quinc 05/01/201 05/15/201 05/15/201 do Ingresos 10.953.00 | DATA IMP: Federal Estado Civil: Single Concesiones: 0 Pct. Adel.: Cant. Adel.: Descripcion Fed FICA Med Hospital Ins / Fed OASDI/Disability - EE PR Withholding | 23.51 211.59 1 116.62 1.049.50 |
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| Total: | | 1,217.00 | 720.00 | 10,953,00 | BEDODER ERESTRASI | KONALPS PAGADOS |
| 512316566[0] | irs | Deput Citables | Corriente | | Descripcion | Corriente Acumulado |
| Descripcion GPR Retiro Hibrido | Corriente Acumulado 121.70 1.095.30 | Descripcion SI-Seg Incap. Obligatorio SM-First Medical Health Plat DM-FONDOS UNIDOS SC-TRANS OCEANIC LIFE RC-Pres Pers Ret Cen-E Clat DM-GOB SEG SOC CHOFF OS-SERV PUBLICOS 009 E Ahorros-AEELA | 3.0 n 5.2 1.0 3 18.1 sif 131.5 RES 1.0 | 4 27.36 5 47.25 0 9.00 6 157.72 2 1,983.68 9 9.81 0 162.00 | GPR Retiro Hibrido FSED Disability Plan SM-First Medical Health Pla | 188.94 1,700.46 40.77 366.93 an 0.00 720.00 |
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| 1 | | · L. | | | * Telburghia | <u> </u> |
| Balance Previo: + Acumulado: - Utilizado: Balance Final: Los balances de licencias | | Total: | | 116.62 1,049.50 | * Tributable DEDGCCIONE. TO EASE 336.27 3.020.71 BUSINERBUCION Aviso #7890083 Total: | 764.11 6.882.79 PAGA NECA 764.11 |
| MENSAJE: | | | | | - | And the second second |
| Adm.Desarrollo S PO BOX 8000 SAN JUAN, PR (| | | | echa 5/15/2017 | | Aviso No. 7890083 |
| Cant. Deposito: A la Cuenta(s) De | \$764.11 ANTONIA HERNANDE BO. EL TUQUE SECT N S13 CALLE L PONCE, PR 00728 Localizacion: Ponce 3 | | | Tipo de Savings | | enta Cant. Deposito |

| Case:17- | -03283-LIS Doc# | :13964-1 File Exhibit | 9d:08/04/ 11 Apg 1 | /20 Enter | red:08/05/20 11:38 | 5:46 Desc: |
|---|---|--|--------------------------------|--------------------------|--|--------------------------------------|
| Docor | rrollo Socio Economico | LAHIDIU | Page 1 Grupo de Desde: | 05/16/20 | ncenal 17 | echa Aviso: 05/30/2017 |
| PA PAY 8000 | | | Hasta: | 05/31/20 | 17 | |
| SAN JUAN, PR 00 | | # Empleado: XXXXX6 | | | DATA IMIT. | R |
| ANTONIA HERNA | NDEZ HERRERA | # Empleado: XXXXXX Dept: 127100-P | OUCE 0920 | | ESCAGO CIVIII | lingle +6 |
| BO. EL TUQUE SEC | CT NUEVA VIDA | turner Ponce 3 | | - | Concesiones: 0 0 Pct. Adcl.: | •• |
| SI3 CALLE L PONCE, PR 00728 | | Titulo: Tecnico A | Asist Sec y Fam I O Monthly | [[| Cant. Addl.: | |
| SS: XXX-XX-6836 | | Sueldo: \$2,434.U | , | | partest | S. |
| | HORAS E INCHES | OS Corriente | —— Асип | ulado | | |
| Descripcion | Sueldo | Horas Ingresos | Horas | Ingresos | Ped FICA Med Hospital Ins / EE | rriente Acumulado |
| Pago de Salarios Regul | lares | 1,217.00 | 810,00 | 12,170.00 | Fed OASDI/Disability - EE | 75.45 754.54 |
| | | | ., | | PR Withholding | 23.51 235.10 |
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| otal: | | 1,217.00 | 810.00 | 12,970,00 | Total: | 116.61 1,166.11 |
| | (0XISS | DEDUCCIO) | ies Centerali | | BEVERGUSPATERON | |
| escripcion | Corriente Acumulado | | Corrier | | Descripcion SM-First Medical Health Plan | Corriente Acumulado 180.00 900.00 |
| PR Retiro Hibrido | 121.70 1,217.00 | SI-Seg Incap. Obligatoric SM-First Medical Health | 1 | 1.04 30.40 1.25 52.50 | GPR Retiro Hibrido | 188.94 1,889.40 |
| | | DM-FONDOS UNIDOS | 1 | .00 10.00 | FSED Disability Plan | 40.77 407.70 |
| | | SC-TRANS OCEANIC | 1 | 3.16 175.88 | | |
| | | RC-Pres Pers Ret Cen-E | Clasif 131 | 52 1,315.20 | ĺ | |
| | | DM-GOB SEG SOC CH | | .09 10.90 | | |
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| Totale | 121.70 1.217.00 | Total: | 214 | l.57 2,139.98 | * Tributable | |
| Total: | | RUTO TRIBUTE FED | | MIPURSTOS | DEDUCCIONESTOTALES | PAGA NETA |
| Corriente: | 1,217.00 | 0.00 | | 116.61 | 33627 | 764.12 |
| Acumulado: | 12,170.00 | 0.00 | | 1,166.11 | 3.356.98 | 7,646.91 |
| Vacación Balance Previo: | Noras Enfermedad 0.00 Balance Previo: | 0.00 Balance Previo: | 136749 0.00 | _ | DISTRIBUCION PAG Aviso #8156929 | |
| + Acumulado: | 0.00 + Acumulado: | 0.00 + Acumulado: | | | AVISO #8130929 | 764.12 |
| - Utilizado: | 0.00 - Utilizado: | 0.00 - Utilizado: | 0.00 | | Total: | 764.12 |
| Balance Final: | 0.00 Balance Final: | 0.00 Balance Final: | 0.00 | <u> </u> | | |
| os balances de licencis MENSAJE: | as corresponden al periodo de: | | | | | |
| Adm.Desarrollo : PO BOX 8000 SAN JUAN, PR | Socio Economico 00910-0800 | · | | Fecha 5/30/2017 | | Aviso No. 8156929 |
| | | | | | | |
| 74 D- ** | ABC4.40 | | | Tipo de C | uenta Numero de Cuenta | |
| Cant. Deposito: | <u>\$764.12</u> | | | Savings | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Cant. Deposito XX 764.12 |
| la Suenta(s) De | | | į | | | |
| uema(S) De | ANTONIA HERNANDEZ BO. EL TUQUE SECT NU S13 CALLE L PONCE, PR 00728 | ZHERRERA JEVA VIDA | | | | |
| | Localizacion: Ponce 3 | | | Total | | |

Doc#:13964-1 Filed:08/04/20 Entered:08/05/20 11:38:46 -- Desc: -Page 11 of 15 Exhibit 127 Adm. Desarrollo Socio Economico PO BOX 8000 Aviso #: SM -Quincenal Grupo de Pago: Fecha Aviso: 06/15/2017 06/01/2017 Desde: 06/15/2017 SAN JUAN, PR 00910-0800 Hasta: DATA IMP Federal PR ANTONIA HERNANDEZ HERRERA # Empleado: XXXXX6836 Single Single Estado Civil: BO. EL TUQUE SECT NUEVA VIDA Dept: 127100-Ponce 0+6 0 Concesiones: \$13 CALLE L Lugar: Ponce 3

Tecnico Asist Soc y Fam III

Titulo:

Pal Add.:

| ONCE, PR 00728 S: XXXX-XXX-6836 | Sueldo: S2.434.00 Monthly | | | | Cant. Adel.: | | | | | |
|------------------------------------|---------------------------|-----------|-----------|--------------------|------------------|-------------|--|----------------|----------------------------|--|
| 33; AAA-AA-0830 | | | Jucity. | 32.434.85 (| .0 | | | | | |
| | FIORAS | KINGRESO | 5 | | | | 18926 | STOS | | |
| | - | | Corriente | | Acumul | | 1 | _ <u>_</u> . | | |
| escripcion | S | ueldo | Horas | Ingresos | Horas | Ingresos | | Corriente | Acumulad | |
| ago de Salarios Regulares | | | | 1,217,00 | 892.50 | 13.387.00 | Fed FICA Med Hospital Ins / Fed OASDI/Disability - EE PR Withholding | 75.45 23.51 | 194.11 829.99 258.61 | |
| | | | | · | -, | | | | | |
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| | | | | ; ; | | | | | | |
| ital: 🤝 🎁 💮 | | | | 1.217.00 | 892.50 | 13.387.00 | Total: | 116.60 | 1,282,71 | |
| DEBUGGIONES | | | | NUPUEGE (CINE | Keidyidie (1808) | | HEXISTER (0.05) PX 18 | | | |
| escripcion | Corriente | Acumulado | | | Corriente | Acumulado | | | Acumulado | |
| PR Retiro Hibrido | 121.70 | 1,338.70 | SI-Seg In | ncap. Obligatorio | 3.0 | 33.44 | GPR Retiro Hibrido | 188.94 | 2,078.34 | |
| | | | SM-First | t Medical Health P | lan 5.2 | s 57.75 | FSED Disability Plan | 40.77 | 448.47 | |
| | | | DM-FO | NDOS UNIDOS . | . 1.0 | 00.11.00 | SM-First Medical Health Plan | 0.00 | 900.00 | |
| | | | SC-TRA | NS OCEANIC LIE | FE 18.1 | 6 194.04 | i | | | |
| | | | RC-Pres | Pers Ret Cen-E C | 1 | | | | | |
| | | | | B SEG SOC CHO | | | | | | |
| | | | | V PUBLICOS 009 | | | | | | |
| | | | | -AEELA | 36.5 | | | | | |
| | | | 1 2001103 | -ALCELA | 303 | 401201 | | | | |
| | | | 1 | | \ | | • • | | • | |
| | 2 ⁵ 2 | , | | | · · · · | | <u></u> | | · <u>·</u> ··· | |
| Total: | 121,70 | 1.338.70 | Total: | | 1 214.5 | | * Tribumble | | | |
| | TOTAL BRIFTS | E I | (E160)3E | 11:168:535E | 0.00 | | DEDUCCIONES/IDTALES | | 3(C4) V2(1) | |
| Corriente: | 1,217.00 | | | 0.00 | | 116.60 | 336.27 | | 764.13 | |
| Acumulado: | 13,387.00 | | | 0.00 | ; | 1.282,71 | 3.693.25 | | 841174 | |
| | rat Enfermeda | (i | | Ejempa Cottiba | | | MINISTRIBUCIONE | AGALVETANNI | Ulthishiamu | |
| | 0.00 Balance Pre | vio: | 0.00 | Balance Previo: | 1 | | Aviso #8475605 | | 764.13 | |
| + Acumulado: | 0.00 + Acumula | ido: | 0.00 | + Acumulado: | | | | | | |
| | 0.00 - Utilizado: | | 0.00 | - Utilizado: | 0.00 | I | Total: | | 764.13 | |
| | U.UU-1 - UHIIKAUU. | | | | 0.00 | | | | | |

Los balances de licencias corresponden al periodo de:

MENSAJE:

PONCE, PR 00728

Adm.Desarrollo Socio Economico PO BOX 8000 SAN JUAN, PR 00910-0800

Fecha 06/15/2017 Aviso No. 8475605

Cant. Deposito:

\$764.13

A la Cuenta(s) De

ANTONIA HERNANDEZ HERRERA BO. EL TUQUE SECT NUEVA VIDA S13 CALLE L PONCE, PR 00728

Localizacion: Ponce 3

| Tipo de Cuenta | Numero de Cuenta | Cant. Deposito |
|----------------|---|----------------|
| Savings | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | 764.13 |
| | | |
| | | |
| | | |
| Total: | | 761,1 |

| 127 Adm.Desarrollo PO BOX 8000 SAN JUAN, PR 00910-080 | | L. | xhibit I | Hasta: | 2 Page | 11/15/20 | 17 | Fecha Avis | o: 11/14/2017 |
|--|--|---|--|------------------------|---|---|--|---------------------|------------------------------|
| NTONIA HERNANDEZ I O. EL TUQUE SECT NUE 13 CALLE L DNCE, PR 00728 :: XXX-XX-6836 | HERRERA | # Empleado Dept: Lugar: Titulo: Sueldo: | 127100-Pon Ponce 3 | ce st Soc y Fam | Ш | | DATA &MP: Federal Estado Civil: Single Concesiones: 0 Pct. Adcl.: Cant. Adcl.: | PR Single 0+6 | |
| | HORAS E INGRES | | | | mulado | | IA. | HPERSTON. | |
| escripcion | Sueldo | - Corriente Horas | Ingresos · | Horas | In | gresos | Descripcion | Corriente | Acumulad |
| go de Salarios Regulares | | | 1,217.00 | 1,710.00 | 25, | <i>55</i> 7.00 | Fed FICA Med Hospital Fed OASDI/Disability - PR Withholding | | 370.58 1,584.53 496.27 |
| * | | | | | | | | | |
| | | | 1,217,00 | 1,710.00 | 25 | 557.00 | Total: | 117.89 | 2,451,38 |
| otal: DEDUCCIONE | | | DEDUCCIONE | | ********** | 33730 | | aetronalepsepa | GADES |
| Descripcion | Corriente Acumulad | o Descripcio | n . | Согг | iente | Acumulado | Descripcion | Corrien 40.7 | te Acumulado 7 856.17 |
| 3PR Plan Aport. Definidas | 103.45 2,519.20 | SM-First M DM-FONI SC-TRAN RC-Pres P DM-GOB | ap. Obligatorio Medical Health I DOS UNIDOS S OCEANIC LI ers Ret Cen-E C SEG SOC CHO PUBLICOS 00 LEELA | FE Clasif OFERES | 3.04 5.25 1.00 18.16 131.52 1.09 18.00 36.51 | 63.84 110.25 21.00 375.64 2,761.92 22.89 378.00 766.71 | FSED Disability Plan SM-First Medical Health GPR Plan Aport. Definit | Plan 0.0 | 0 1,800.00 |
| Total: | 103.45 2.5192 | 20 Total: | | | 214.57 | 4,500.25 | * Tributable | | 1 |
| Corriente: | 1217.00 | BRUTO TRU | 0.00 | TOT ! | a singer | JESTOS 117.89 | DEDUCCIONES TOTA 318.02 | LES | PAGA NETA 781.09 |
| Acumulado: | 25 <i>,55</i> 7.00 | | 0.00 | | | 2.451.38 | 7,019.45 | | 16.086.17 |
| Vacacion F Balance Previo: | 0.00 Balance Previo: | WANTED STREET, SALES | tempo Comp. Balance Previo: | Hor. | 0.00 | | Aviso #139290 | DV PAGA NETA 4 | 781.09 |
| + Acumulado: | 0.00 + Acumulado: | , 0.00 | F Acumulado: | | 0.00 | | | <u> </u> | 701.00 |
| - Utilizado: Balance Final: | 0.00 - Utilizado: 0.00 Balance Final: | | Utilizado: * | | 0.00 | | Total: | | 781.09 |
| | orresponden al periodo de: | | й 1 | | | | | • | |
| mensaje: | | | | | | | | | |
| Adm.Desarrollo So PO BOX 8000 SAN JUAN, PR 00 | | | | | Fech: 11/14 | n 1/2017 | | | Aviso No. 392904 |
| 4 | to en está en est | i di Santa | 1 | | | Sweens | ECADA DE MEROSEIGA | | |
| Cant. Deposito: | \$781.09 | | | | | Tipo de C Savings | | enta C | ant. Deposito 781.09 |
| A la Cuenta(s) De | ANTONIA HERNAND BO. EL TUQUE SECT S13 CALLE L PONCE, PR 00728 | | | | | | | · | |
| | Localizacion: Ponce 3 | | ş. 3: | } . | | Total: | | | 781.09 |



Case:17-03283-LTS Doc#:13964-1 Filed:08/04/20 Entered:08/05/20 11:38:46 Desc: Exhibit Page 14 of 15

| | | | | | SM On | - Ini | | Business U | Init: PUERT |
|--|---------------------------|--|--|------------------------------------|--|---|---------------------------|---------------------|---------------------------------|
| Gobierno de Puerto Rico | ns | | | Grupo de Desde: | 12/01/2 | 018 | | Aviso #: | 8699877 so: 12/14/2018 |
| 530 - RETIRO CENTRAL PENSIONADO ANTONIA HERNANDEZ HERRERA PARC NUEVA VIDA S13 CALLE FRANCISCO LUGO PONCE PR 00728-6793 SS: XXX-XX-6836 | | # Empleado: Dept: Lugar: Titulo: Sueldo: | : P584676836 530500-Amu: LEY 3- 07-0 Pensionado \$675.35 Mon | Hasta: alidad Hibrida 1-2013 | 12/15/2 Ley 3 | DATA IMP: Estado Civil: Concesiones: Pct. Adel.: Cant. Adel.: | Federal Single 0 | PR Single 0 | |
| SS: XXX-XX-0830 | DRAS E INGRES | Corriente | | Асип | | | шиг | | |
| Descripcion Pago de Salarios Regulares Pago Retro Pensionados | Şueldo | Horas | 337.68 0.00 | <u>Horas</u> 1,792.50 | 7,428.96 686.24 | Descripcion | | Corriente | Acumulado |
| Total: DEDECCIONES Descripcion Corrier | nte Acumulado | Descripcion | 337.68 EDUCCIONES | Corrie | 8.115.20 ES nte A <u>cumulad</u> 1.00 15.00 | o Descripcion | EFICIOS PA | 0.00 TRONALES PA | 0.00 AGAĐOS nte Acumulado |
| | | Ahorros-AE | | | 0.13 40.52 | | | | |
| TOTAL BI | | Total: | _ | | 1.13 55.52 :IMPUESTOS 0.00 | * Tributable DEDUCCIO | NESTOTA | LES | PAGA NETA 326.55 |
| Joil Ichia. | 337.68 115 <u>.</u> 20 | | | Lie Mil | 0.00 | 186 | 55.52 | ON PAGA NET | 8,059.68 |
| TO HORAS ACUM Salance Inicial: 0.0 - Acumulado: | | | | | | . A | viso #869987 | | 326.55 326.55 |
| - Utilizado: - Donada: - Ajustes: Balance Final: MENSAJE: | DC - D:11 | and Vizeava | os Pensionad | s cambios | onados! ían cuentas en l de ruta y tránsi tados próxima | to correspond | Doral, Wes | i ei proposito | |
| THE COURT OF THE C | | | | | | | | | |
| Para información llame al 787 Gobierno de Puerto Rico 30 - RETIRO CENTRAL PENSIONADOS | | | | | Fecha 12/14/2018 | | | | Aviso No. 8699877 |
| Cant. Deposito: \$326.55 | _ | | | | DISTRIF Tipo de C Savings | BUCION DE DE Cuenta N | POSITO DI lumero de Cu | | Cant. Deposito \$326.55 |
| TRAY 88 SQ 21734 ANTONIA HERNANDEZ I PARC NUEVA VIDA S13 CALLE FRANCISCO I | HERRERA | | | | Total: | | | | \$326,55 |
| PONCE PR 00728-6793 | | | | | | O ATT | TOOT | ADIE | |

CERTIFICACIÓN

Certificamos que ANTONIA HERNANDEZ HERRERA, disfruta beneficios de PENSION LEY 3 de este Sistema de Retiro. La misma fue efectiva el 16 de diciembre de 2017. En la actualidad, recibe una anualidad ascendente a \$8,104.32 pagadera en mensualidades de \$675.36.

Esta certificación se expide hoy 17 de julio de 2020, en San Juan, Puerto Rico. Certifico correcto,

th

Marlisa Marrero Negron Gerente Auxiliar División de Asuntos de Pensionados

EESTR01

